

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	R. Hugo Patterson	Examiner:	Kaushikkumar M. Patel
Application No.:	10/611,309	Art Unit:	2188
Filed:	June 30, 2003	Docket No.	DDOMP003
Title:	DATA STORAGE U	JSING IDENTIFII	ERS

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450,

Alexandria, VA 22313-1450 on

March 3, 2006.

TRANSMITTAL OF AMENDMENT A

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment A in response to Office Action mailed October 6, 2005 in the above-identified application.

The fee has been calculated as shown below.

CLAIMS	A G A 1	IID*	Extra	Small Entity			Large Entity		
	After Amd.	HP*	Exua	Rate	Fee		Rate	Fee	
Total	31	31	-0-	x \$25 = \$		OR	x \$50 = \$		
Independent	3	3	-0-	x \$100 = \$		OR	x \$200 = \$		
Multiple Dependent Claims		x \$180 = \$		OR	x \$360 = \$				
*HP = Highest previously paid			TOTAL FEE \$		OR	TOTAL FEE \$	-0-		

Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

	SMALL ENTITY		SMALL ENTITY		LARGE ENTITY	
1		Rate	Add'l Fee		Rate	Add'l Fee
Extension for Response within FIRST month		x \$60 = \$		OR	x \$120 = \$	
Extension for Response within SECOND month		x \$225 = \$		OR	x \$450 = \$	\$450.00
Extension for Response within THIRD month		x \$510 = \$		OR	x \$1020 = \$	
Extension for Response within FOURTH month		x \$795 = \$		OR	x \$1590 = \$	
Extension for Response within FIFTH month		x \$1080 = \$		OR	x \$2160 = \$	<u> </u>

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450.00 DA

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determin be grante	Applicant(s) believe that no (additional) Extension of Time is required; however, if it is ned that such an extension is required, Applicant(s) hereby petition that such an extension ed and authorize the Commissioner to charge the required fees for an Extension of Time 7 CFR 1.136 to Deposit Account No. 50-0685. (DDOMP003).
	Enclosed is our Check No in the amount of \$ to cover the additional claim or extension of time fees.
E	Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.
E	Enclosed aresheets replacement drawings.
	Please charge Deposit Account No. 50-0685 (DDOMP003) in the amount of \$450.00 to be additional claim fee and/or extension of time fees.
the subje	If the required fees are missing or any additional fees are required during the pendency of ect application, please charge such fees or credit any overpayment to Deposit Account 0685 (DDOMP003).
	OTHER:

Respectfully submitted, VAN PELT, YI & JAMES LLP

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